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Representing **CALIFORNIA'S 39th** District

**MEMBER DAY TESTIMONY BEFORE THE
HOUSE COMMITTEE ON ENERGY AND COMMERCE**

July 25, 2019

Chairwoman Eshoo, Ranking Member Burgess, and members of the House Energy and Commerce Subcommittee on Health, thank you for allowing me this opportunity to provide testimony on the health issues affecting constituents in my district. I hope the information I share today will help inform your work as you examine policies to advance access to quality and affordable healthcare for all Americans.

Access to affordable healthcare is a top priority for my constituents. Just last weekend, I hosted an Open House for my constituents in my District Office and nearly every person who attended raised healthcare access and affordability. Whether it is fear that the current administration will undermine protections for pre-existing conditions, concern that healthcare premiums and prescription drug costs will skyrocket, or pleas from patients with deadly diseases and their families for increased investments in medical research, my constituents are looking to us for leadership.

I am sincerely grateful for the actions this Committee has taken to date to help address some of these concerns. I was immensely proud to cosponsor and cast my vote in favor of H.R. 987, the Strengthening Health Care and Lowering Prescription Drug Costs Act, earlier this year to ensure those with pre-existing conditions are not discriminated against, prevent the administration's recent actions undermining the Affordable Care Act, and we must urgently address the rising cost of prescription drugs by ending "pay for delay" practices that prevent affordable generic prescription drugs from being brought to market.

More needs to be done to make healthcare premiums truly affordable, however, particularly for those approaching Medicare age. I support legislation introduced by Rep. Higgins, H.R. 1346, the Medicare Buy-In and Health Care Stabilization Act of 2019, to address age ratings that inflate monthly costs. By giving Americans who are approaching retirement age the option to buy into the health insurance program with the highest satisfaction rate, we can ensure older Americans have access to a wider provider network with lower administrative costs.

In parallel, we must protect patients against unexpected emergency room costs, and I appreciate this Committee's action to date to closely examine this issue. Patients who are treated by an out-of-network provider, through no fault of their own, should be protected by law from paying bills more than what would be expected when in-network. I look forward to continued work on this issue on the House floor when we return from the August work period.

When it comes to prescription drugs, I believe more aggressive action is necessary. I support legislation introduced by Rep. Doggett, H.R. 1046, the Medicare Negotiation and Competitive Licensing Act, to allow the Secretary of Health and Human Services to negotiate directly with Pharmaceutical companies on prescription drug prices, just as we do for prescription drugs under the Veterans Health Administration. With Americans dying because they are rationing lifesaving drugs like insulin due to prices, we must act with deliberate speed.

I want to express my gratitude to the Committee for your action to date to prevent an expiration of the Community Health Center (CHC) fund. There are 14 CHCs in my district and provide many of my constituents with the accessible care they need. I had the immense privilege to tour the St. Jude Neighborhood Health Center in Fullerton earlier this year and saw firsthand the excellent care they provide to underserved populations, from primary care services to dental and mental healthcare. It is absolutely critical that we extend the CHC fund to ensure it does not expire.

While I am grateful this Committee approved H.R. 2328, the Community Health Investment, Modernization, and Excellence (CHIME) Act of 2019, earlier this month, I am concerned that it reduces the reauthorization length from five to four years and that it does not contain annual inflationary adjustments to account for rising costs of healthcare. Your Senate counterpart has approved legislation to provide for a five-year extension which will provide more certainty for CHCs to make long-term plans and explore innovative solutions to support their community. I support Rep. Clyburn's legislation, H.R. 1943, the Community Health Center and Primary Care Workforce Expansion Act of 2019, which would extend the CHC fund and National Health Service Corps (NHSC) for five years with annual growth rates and includes additional funding for health center capital funding.

Finally, I would like to take this opportunity to ask that you take steps to support our brothers and sisters who live with disabilities. I support legislation introduced by Rep. Sensenbrenner, H.R. 555, the Disability Integration Act of 2019, which will help ensure Americans with disabilities have a right to stay in their homes to receive services. Those living with disabilities must be afforded the choice to stay in their communities rather than an institutional setting, and we have a duty to ensure their voice is not lost in Congress.

I thank you again for your efforts to date and for your judicious work to help Americans afford and access healthcare services. I look forward to continuing to work with you on behalf of my constituents in California's 39th Congressional District.